BEST AVAILABLE COPY

DATENT	ADDI ICATION	eee i	DETERMINATION	DECODD
PAIENI	APPLICATION		DETERMINATION	RECORD

Effective October 1, 2001

Application or Docket Number

CSTO-012/49/2

	CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN											
(Column 1) (Column 2)						mn 2)		TYPE			OR SMALL ENTIT	
TOTAL CLAIMS			30				Г	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		ASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			30 minus 20= * /		* 10	0		X\$ 9=		OR	X\$18=	180
INDEPENDENT CLAIMS			/ / minus 3 = * /				X42=	-	OR	X84=	84	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in					r "0" in c	olumn 2		OTAL		OR	TOTAL	1,004
CLAIMS AS AMENDED - PART II								•			OTHER	THAN
(Column 1) (Column 2) (Column 3)							S	MALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	-	=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	CL AIM			X42=	_	OR	X84=	
			3E-11 EE DE1	LINDLIN	OB WIVE	 	' ·	-140=		OR	+280=	
								TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	ADI	DIT. FEE	<u>'</u>	i '	ADDII. PEET	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		Ħ] [;	K\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	;	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								140=		OR	+280=	
			•				L	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colui		(Column 3)	- ADI	JII. I C.C.			ADDII. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=] >	(\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL ALL	=	↓ [;	X42=	. "	OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					」 	140=	-	OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										1	TOTAL	
**												
	'lf the "Highest Nu	imber Previously P imber Previously P nber Previously Pa	aid For" IN TH	IS SPACE	is less tha	n 3, enter "3."	٦٧١	DIT. FEE			ADDIT. FEE	÷,